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4				<input type="checkbox"/> YES <input type="checkbox"/> NO
5				<input type="checkbox"/> YES <input type="checkbox"/> NO
6				<input type="checkbox"/> YES <input type="checkbox"/> NO
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8				<input type="checkbox"/> YES <input type="checkbox"/> NO
9				<input type="checkbox"/> YES <input type="checkbox"/> NO
10				<input type="checkbox"/> YES <input type="checkbox"/> NO

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